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PATENTS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Clark, John, et al.	Atty. Docket:	88197.000007
Serial No.:	10/616,445	Examiner:	Mitchell, Katherine W.
Filed:	July 9, 2003	Art Unit:	3677
Title:	WAVE ATTENUATOR		

Response

Mail Stop Non-Fee Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Sir:

In response to the Office Action mailed February 12, 2004, please consider the attached response and amend the above-identified application as follows:



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PTO/SB/92 (08-03)  
Approved for use through 07/31/2006. OMB 0651-0031  
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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On May 10, 2004  
Date

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Paula Weil

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### ENCLOSED ARE:

Transmittal Form (1 page);  
Response (11 pages);  
Certificate of Mailing (1 page);  
Acknowledgement Postcard (1)

Attorney Docket No. 88197.000007

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PTO/SB/21 (02-04)

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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	10/616,445
	Filing Date	July 9, 2003
	First Named Inventor	Clark, John
	Art Unit	3677
	Examiner Name	Mitchell, Katherine W.
	Attorney Docket Number	88197.000007
Total Number of Pages in This Submission		

**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communications to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <b>Certificate of Mailing; Acknowledgement Postcard</b>
<b>Remarks</b>		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Donna P. Suchy, Registration No. 47,979 HARTER, SECREST & EMERY LLP
Signature	
Date	May 10, 2004

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Type or printed name	Paula Weil		
Signature		Date	May 10, 2004

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